



UNIVERSITY
PHYSICIANS
BROOKLYN, INC.

INSIDE

Dental 2

Flexible Spending Account (FSA) 3

Benefits VIP 4

benefits that benefit you

YOUR 2011 OPEN ENROLLMENT FOR DENTAL BENEFITS AND FLEXIBLE SPENDING ACCOUNT



UPB recognizes the important role employee benefits play as a critical component of overall compensation, and we continue to make every effort to provide the best quality benefit plans for our staff and their families.

Once again it's our Open Enrollment period for our Dental and Flexible Spending Account (FSA) Plans, which means you have the opportunity to evaluate your benefit needs and make benefit elections for the coming year.

Dental Plan

Delta Dental continues to offer the most competitive rates, benefits and network for our dental plan, and as such, we have not made any changes to the current plan. Your contributions will also continue without any changes as reflected on the enclosed contribution sheet.

FSA Plan

This is your annual opportunity to join or change your contribution amount to the FSA plan. You must re-enroll for the 2011 plan year, as your current elections will not automatically rollover.

The Open Enrollment period for the 2011 plan year begins on November 22, 2010 and ends on December 17, 2010.

Actions to Take for 2011	
If you want to:	Here's what you must do by December 17, 2010:
Contribute to the Flexible Spending Account	Complete the enclosed FSA Health Care and Dependent Care Enrollment form and fax to Human Resources 718-613-8715
Sign up for FSA Direct Deposit	Complete the enclosed Employee Direct Deposit Authorization form and fax to Human Resources 718-613-8715
Verify your Dental Benefits Coverage and ask questions about the how the Delta Dental plan works	Dial 1-800-932-0783 and provide the UPB Group Number: NY 06097
Continue with your current dental coverage	Do nothing! You'll be enrolled with Delta Dental, effective January 1, 2011
Change, add to or cancel your current dental coverage	Complete the enclosed Benefit Enrollment/Change form and fax to Human Resources 718-613-8715

If you are making FSA elections or changes to your dental plan coverage, complete and return the enclosed enrollment forms to Human Resources by **December 17, 2010**. These changes will be in effect January 1, 2011 – December 31, 2011.

Should you have any questions, please contact Raquel Nurse at 718-804-7808.

2011 benefits

DENTAL BENEFITS HIGHLIGHTS



Delta Dental of NY PPO allows employees the freedom to select the dentist of their choice. Delta's two networks have over 120,000 participating dentists in the plan. Their Preferred Network, which will provide a richer benefit than the Premier or Out of Network plan, has 60,000 dentists nationally from which to choose. Please note that out of network dentists can charge the difference between their fee for service and Delta Dental's Reasonable & Customary (R&C) fees.

BENEFIT	PPO PREFERRED NETWORK	PREMIER NETWORK & OUT OF NETWORK
Annual Deductible	Individual: \$50 Family: \$150	Individual: \$50 Family: \$150
Benefit Maximum	Individual (Annual): \$1,500 Orthodontia (Lifetime): \$1,000	Individual (Annual): \$1,500 Orthodontia (Lifetime): \$1,000
Preventive Services Include: <ul style="list-style-type: none"> • Prophylaxis (Cleanings) • Oral Examinations (3x/year) • Topical Fluoride (2x/year up to age 19) • X-rays • Sealants (up to age 16) • Space Maintainers (up to age 16) 	100% (no deductible)	100% (no deductible)
Basic Services Include: <ul style="list-style-type: none"> • Fillings • Extractions • Oral Surgery • Endodontics • Periodontics • Repairs of dentures, crowns, inlays and onlays 	100% after deductible	100% after deductible
Major Services Include: <ul style="list-style-type: none"> • Bridge and Dentures • Inlays, Onlays • Implants 	60% after deductible	60% after deductible
Orthodontic Services (children to age 20):	50% (no deductible)	50% (no deductible)

For detailed information about the PPO plan and a list of network providers, you may contact Delta Dental at **800-932-0783**. You may also visit www.deltadentalins.com for more information.



FLEXIBLE SPENDING ACCOUNT



Reimbursement Accounts

The Flexible Spending Account (FSA) offers a unique way to save money on health care and dependent care expenses. By participating, you are able to pay for qualifying expenses with pre-tax income. This lowers the taxes you pay and gives you more spendable income.

- Under the Dependent Care Plan you can use this money to pay for eligible childcare or adult daycare costs.
- The Health Care Plan can be used to pay medical, dental, vision and other healthcare expenses incurred by yourself or an eligible dependent which are not covered under an insurance program. Keep in mind, over-the-counter medications, such as cold and allergy medicines, aspirin, other pain relievers, antacids and other medicines and drugs that treat a medical condition, also qualify as reimbursable under the plan.

FSA Contribution Limits

Each year you must decide in advance, the amount to be put into your FSA. The amounts you set aside will be deducted equally per paycheck in 2011. The annual maximum for the Health Care Plan is \$5,000 and the annual maximum for the Dependent Care Plan is \$5,000.

Key Points to Remember About the Flex Plan

- Elections cannot be changed during the year unless you have an eligible "change in status" as defined in the Summary Plan Description.
- Fund balances remaining from 2011 may be used for expenses incurred (services received) up to March 15, 2012.
- Unused balances from 2011 remaining after March 31, 2012 must, by law, be forfeited (use it or lose it).

Important Plan Information

How to Contact Aetna:

- **Online:** Go to: **www.myaetnafunds.com**
 - Click "contact us", located at the bottom of the website
 - Complete the information to submit an inquiry
- Via **Fax** at **847-332-0335**
- Via **Mail:**
Aetna
10275 W. Higgins Road
Suite 500
Rosemont, IL 60018

If you have any questions, contact Aetna at **866-472-0897**.

Who's Eligible?

As a regular, full-time employee, you are eligible for the benefits described in this overview. You can also cover family members including your:

- Spouse
- Same-sex domestic partner
- Unmarried dependent children who are:
 - Less than age 19, or
 - Less than age 25 and a full-time student, or
 - Over age 19 if disabled before age 19 and dependent upon you for support.

Marriage, Birth Certificate, and/or Adoption paperwork must be provided for enrolling a spouse or child(ren). A Declaration of Domestic Partnership form, with three types of proof, must be provided for enrolling a domestic partner.



benefits call center

Your dedicated BenefitsVIPSM service team is here to assist every employee with all your benefits issues, questions and concerns.

BENEFITS QUESTIONS AND CLAIMS RESOLUTION



NO MORE HEADACHES resolving healthcare benefits issues!

Call us today! Your personal team of healthcare benefits experts are ready to give you, and your family, the attention they deserve!

This hotline is staffed by benefit professionals from **8:30am to 8:00pm Monday through Friday (EST)**. These specialists are available to help whenever you encounter a problem with Aetna, Delta, Davis Vision, Reliance Standard, Cigna, with any of the following topics:

- Benefits questions
- ID card issues
- Questions regarding bills/claim and resolutions
- Prescription issues
- Provider network questions
- COBRA
- ...and much more!

*No more calls to your carrier and being stuck on hold waiting for assistance. A majority of issues are resolved the same day. "ONE CALL DOES IT ALL!," and **all calls are fully HIPAA compliant.***

For personal service that's **CONFIDENTIAL** and **RESPONSIVE**, contact:

1.866.286.5334

Questions@benefitsvip.com

ONE CALL DOES IT ALL!

This benefit summary provides selected highlights of the employee benefits program at UPB. It is not a legal document and shall not be construed as a guarantee of benefits nor of continued employment at UPB. All benefit plans are governed by master policies, contracts and plan documents. Any discrepancies between any information provided through this summary and the actual terms of such policies, contracts and plan documents shall be governed by the terms of such policies, contracts and plan documents. UPB reserves the right to amend, suspend or terminate any benefit plan, in whole or in part, at any time. The authority to make such changes rests with the Plan Administrator.



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